

## ARIZONA DEPARTMENT OF WATER RESOURCE

Water Management Division 3550 North Central Ave, 2<sup>nd</sup> Floor Phoenix, Arizona 85012-2105 Phone (602) 771-8585 Fax (602) 771-8689

APPLICATION FOR UNDERGROUND STORAGE FACILITY PERMIT (A.R.S. § 45-811.01)

APPLICATION FEE \$ 750.00 DUE UPON FILING

FACILITY DESIGN: (check one)

PERMIT FEE OF \$ 500.00, PLUS NOTICE AND PUBLICATION FEES TO BE DETERMINED, WILL BE DUE PRIOR TO ISSUANCE OF PERMIT

FOR OFFICE USE ONLY

Application No.: 71-519567.0001

Date Received: 4-29-68

APPLICATION FOR: (check one)

PLEASE SUBMIT ONE ORIGINAL AND THREE COPIES OF THE COMPLETED APPLICATION AND ALL SUPPORTING MATERIALS

Constructed	Underground Storage Facility (USF)			
Managed	☐ Modification of	f USF permit no.:		
	71			
	Renewal of USI	Renewal of USF permit no.:		
	<b>71</b> - <u>519567</u>	7.0000		
	GENERAL INFORMATION			
1. Name of Applicant: City of Pr	rescott			
433 N. Virginia		Arizona 86302		
Mailing Address	City	State Zip		
Contact Person: James H. Hol	LtTelephone: 928-777-1130	Fax: 928-771-592		
(NOTE: Pursuant to A.R.S. § 45-893.0 Project program.)	11, only Conservation Districts qualify to partici	pate in State Demonstration		
. Name of Active Management Area or Irr	rigation Non-Expansion Area where the facility	will be located:		
Prescott AMA				
(If the facility is NOT	located within an AMA or INA, please indica	te "NONE.")		
Name of groundwater basin and subbasin where the facility will be located:				
Little Chino Sub-basin				
. Legal description of the location of the fa-	cility: SW1/4 of SE1/4, Section	19, T15N, R1W,		
	cility: SW1/4 of SE1/4, Section ,& NW1/4 of NE1/4, Section	***************************************		

6.	Does the applicant own the land where the	ne facility is to be located? X Yes No
7.	The total design capacity of the facility:	144,000
		(acre-feet to be stored over the duration of the USF permit)
8.	The maximum annual amount of water pr	roposed for storage at this facility: 7,200
9.	Proposed duration of permit:	(acre-feet per year) 20
	• •	(years)
10.	Type of source water to be stored:	
	☐ CAP Water	duent Decreed and Appropriative Surface Water
	If Decreed and Appropriative Surface	e Water, list river(s): Granite Creek and Willow Creek
11.	I agree under penalty of law to obtain any	required floodplain use permit from the county flood control district before
	beginning any construction activities, as re-	equired by A.R.S. § 45-811.01(C)(4).
12.	For managed USFs where effluent will	be stored only: Are you requesting that this facility be designated as a
	facility that could add value to a national	park, national monument or state park, as described in A.R.S. § 45-
	811.01(D)? N/A	
	☐ Yes ☐ No	
	If yes, please submit a completed USF Pe	rmit Application Supplement to designate a Managed Underground Storage
	Facility as one that could add value to a n	ational park, national monument, or state park and all additional information
	as described on the USF Permit Application	on Supplement.
13.	For permit modifications only, give a bri	ef description of the modification(s) requested by this application:
		SUPPORTING EVIDENCE
subn USF	nitted prior to receiving a complete and cor	eluded with this submittal. For a new USF application, all items must be rect determination by the Department. For a modification to an existing to the modification. For a full description of these requirements refer to the n Guide.
14.	USF Site and Facility Characteristics: To	be Submitted to ADWR within 30 days
	Site Characteristics	☐ Geology
	Facility Characteristics	Hydrogeology
15.	Unreasonable Harm and Hydrologic Feasib	oility Analysis: To be Submitted to ADWR within 30 days
		Maximum Area of Impact and Mounding Analysis
	] Land and Water Use Inventory	☐ Unreasonable Harm Analysis ☐ Monitoring Plan
	] Water Quality	☐ Hydrologic Feasibility Conclusions ☐ Operation and Maintenance

16. Legal Requirements: To be S	ubmitted t	o ADWR within	. 30 days		
Technical Capability	☐ Fina	ancial Capability	Legal Access		
	NOTAL				
	NUTAI	RIZED SIGNATURE			
I(We <u>), James H. Holt</u>		, the applica	nt(s) named in this application	n, do hereby	
certify under the penalty of perjury, that		contained and statement	s made herein are to the best	of my (our)	
knowledge and belief true, correct and o	complete.				
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928-777-1130		Samo	1.600		
Telephone		Signature of owner or authorized agent			
		ra de la	••		
		Title	rces Manager		
433 N. Virginia		Prescott	Arizona	86302	
Mailing Address		City	State	Zip	
STATE OF ARIZONA	)				
YAVADA1	) ss.				
County of 14VHHH	)				
	auth		. 0		
Subscribed and sworn to before me this_	24	_ day of	. 20_0	<u>08</u>	
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Justa J. Ch	lyer	_			
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OFFICIAL SEAL CRISTA J. CLEVEN NOTARY PUBLIC - State of	Arizona				
yavapar county  yavapar county	4, 2012				
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